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Bib Data Sheet

CONFIRMATION NO. 3814

<b>SERIAL NUMBER</b> 09/904,995	<b>FILING DATE</b> 07/13/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2671	<b>ATTORNEY DOCKET NO.</b> ZAPME-01015US1 SRM/KFK	
<b>APPLICANTS</b> Clayton Wishoff, Foster City, CA;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/217,919 07/13/2000 <i>YES</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/27/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>T.Z.</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23940 <i>22907</i>					
<b>TITLE</b> Application container for a graphical user environment					
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		